## U.S. Department of Justice

United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF				COURT CASE NUM	
Michaela Karle 3:14-CV-300062-MA			52-MAP		
DEFENDANT TYPE OF PROCESS					
Capital One				Serving of Compl	
<b>A</b>	VIDUAL, COMPANY, COR	PORATION. ETC	. TO SERVE OR DE	SCRIPTION OF PROPERTY 1	O SEIZE OR CONDEM
SERVE Capital One	DED 4				
	et or RFD, Apartment No., Cit	•	Code)		
	One Dr. Mclean, VA 22				
SEND NOTICE OF SERVICE COP	Y TO REQUESTER AT NAM	ME AND ADDRE	SS BELOW	Number of process to be served with this Form 285	
Michaela Karle 79 Thompson St. Springfield, MA 0	1109			Number of parties to be served in this case	
	1103			Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OT All Telephone Numbers, and Estim	HER INFORMATION THA	T WILL ASSIST	IN EXPEDITING SE	RVICE (Include Business and	Alternale Addresses.
VED SMAR PM 3: TRICT MAISIOF	men sames stranger got der	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		D (518	APR 2
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20 英国20				i ri	
ignature of Attorney other Originato	or requesting service on behal	f of:	PLAINTIFF	TELEPHONE NUMBER )	DATE C
Michaela,	Kaple		DEFENDANT	413-887-8804	4/18/14
SPACE BELOW FOR	LUSE OF U.S. MA	RSHAL O	NLY DO NO	OT WRITE BELOW	THIS LINE
acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more han one USM 285 is submitted)	Total Process District of Origin	District to Serve	Signature of Autho	rized USMS Deputy or Clerk	Date 4/22/
	,		MN VII		-1/24.
hereby certify and return that I	tion, etc., at the address show	n above on the on	the individual, comp	any, corporation, etc. shown at t	
I hereby certify and return that I	am unable to locate the indiv	idual, company, c	orporation, etc. name	d above (See remarks below)	
Name and title of individual served (	·	Legal Visisi	ian		table age and discretion defendant's usual place
Carla Cole, Admini	3/14/104 /154(4/40)	<u> </u>			
	<del></del>			Date 05/09/14	1:35
Carla Cole, Admini Address (complete only different than	<del></del>			O5/09/14 Signature of U.S. M	1:35
	n shown above)	Total Charges	Advance Deposits	05/09/14 Signature of U.S. M	farshal or Deputy
Address (complete only different than Service Fee Total Mileage Ch	n shown above)		Advance Deposits	Signature of U.S. M	farshal or Deputy

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

PRIOSIC SCORUES:

- 1. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/15/80 Automated 01/00



## U.S. Department of Justice

## United States Marshals Service

## District of Massachusetts

300 State Street, S-101, Springfield, MA01109

DATE:

April 30, 2014

TO:

United States Marshals Service Eastern District of Virginia (83) Albert V. Bryan Sr. U.S. Courthouse 401 Courthouse Square Alexandria, VA 22314-5785

8 0677	0,00000	MAILREC		}-(	CV-30062			
50 0000 725	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	\$	Postmark Here	i:	1			
	Sent To Eastern D Albert V.	003 · .	a (83) Courthouse		hed process	s, and return	the poof of ser	rvice

Enclosure(s)



#### UNITED STATES MARSHALS SERVICE

Eastern District of Virginia



## TELEPHONE DIRECTORY

DISTRIC	THAI		

Robert W. Mathieson, U.S. Marshall

Office: Cell: (703) 837-5519 (703) 200-8842

John O. Bolen, Chief Deputy

Office:

(703) 837-5524

Cell:

(202) 359-3937

Brian F. Thomas, Asst. Chief Deputy

Office:

(804) 545-8542

Cell:

(804) 246-9134

#### **ADMINISTRATION**

Wendy Putnam

Administrative Officer

Office:

(703) 837-5518

Cell:

(703) 675-9657

#### **OPERATIONAL MANAGEMENT**

Ronald Carter,

Supervisory Deputy - Alexandria Division

Office: Cell:

(703) 837-5514 (202) 345-7273

Vince O'Neal,

Supervisory Deputy - Alexandria Division

Office: (703) 837-5554

Cell:

(202) 345-8223

Andrew Mazerik,

Supervisory Deputy - Norfolk/Newport News

Office:

(757) 963-5970

Cell:

(703) 906-0916

Damell Sims,

Supervisory Deputy - Richmond Division

Office:

(804) 545-8517

Cell:

(202) 369-6295

#### **INVESTIGATIONS & PROGRAMS**

Gregory Sokolewicz,

Supervisory Deputy Fugitives/Warrants

Office: Cell:

(703) 913-4601

(703) 371-5728

Tim Griel, Sex Offender Investigation Coordinator

Cell:

(202) 528-9830

Nick Proffitt,

Protective Intelligence Investigator

Office: Cell:

(757) 963-5968 (703) 926-9344

Lisa Berger,

Judicial Security Inspector

Office:

\_ Cell:

(804) 545-8511 (804) 400-9454

Joseph McDermott,

Judicial Security Inspector

Office:

(804) 545-8510

Cell:

(804) 389-8939

Vacant

Asset Forfeiture Financial Investigator

Office:

Cell:

### ALEXANDRIA DIVISION 401 COURTHOUSE SQUARE, ALEXANDRIA ALBERT BRYAN U.S. COURTHOUSE

MAIN: (703) 837-5

ADMINISTRATIVE STAFF		
Helms, Jeannie	Inv. Research Specialist	(703) 837-5544
Hodges, LeeAnna "Jewel"	Criminal Program Specialist	(703) 837-5538
Morales, Maiya	Administrative Assistant	(703) 837-5512
Norton, Karen	Purchasing Agent	(703) 837-5517
Patterson, Ronda	Management & Program Analyst	(703) 837-5523
Cubia Valenda	Pudget Asshut	(702) 027 EE06

Sylvia, Tulunua	buuget Analyst	(703) 637-	5500
DEPUTY U.S. MARSHALS		AFTER-HOURS (EME	RGENCY): (703) 856-9006
Bradley, Charles	(703) 837-5536	Noel, John	(703) 913-4615
Burgos, Keith	(703) 837-5535	Proctor, Desmond	(703) 837-5558
Carvalho, Justin	(703) 837-5502	Shields, Amanda	(703) 837-5551
Devine, Joshua	(703) 837-5552	Staley, Carl	(703) 837-5553
Eberling, Timothy	(703) 837-5521	Taylor, Joshua	(703) 837-5529
Knapp, James	(703) 837-5527	Turner, James	(703) 837-5526
Vacant		Vacant	

#### **DETENTION ENFORCEMENT OFFICER**

Vacant

NORFOLK DIVISION WALTER E. HOFFMAN U.S. COURTHOUSE	600 GRANBY STREET, NORFOLK, VA 23510 MAIN: (757) 963-5963
Anaras Crass	

Αı	DMINIS	TRAT	IVE S	TAFF

Wilkins, James	Admin. Support Assistant	(757) 963-5992
Harrell, Lori	Criminal Cierk	(/5/) 963-5991

DEPUTY U.S. MARSHALS		AFTER-HOURS (EM	ERGENCY): (703) 926-9361
Alley, Timothy	(757) 963-5989	Rozier, Jerold	(757) 963-5974
Annan, Sherri	(757) 963-5976	Russell, Joshua	(757) 963-5977
Davis, Carter	(757) 247-2847	Silvia, Jason	(757) 963-5964
Nance, Jeffrey	(757) 963-5965	Tolliver, Douglas	(757) 963-5966
Nixon, Alison	(757) 963-5978	Wilhite, Shane	(757) 963-5962
Powers, Lemuel "Mac"	(757) 247-2845	Yetzer, Patrick	(757) 963-5971
Vacant		Vacant	

#### **DETENTION ENFORCEMENT OFFICER**

#### RICHMOND DIVISION ROBINSON/MERHIGE FED. COURTHOUSE

701 E. BROAD STREET, RICHMOND, VA 23 MAIN: (804) 545-8

#### ADMINISTRATIVE STAFF

Moseley, Sonya	Criminal Clerk	(804) 545-8520
Vacant	Admin. Support Lead	(804) 545-8521
Russell, Andrew	Asset Forfeiture Coordinator	(804) 545-8549
Whitehead, Altrecia	Property Management Specialist	(804) 545-8557
Vacant	Asset Forfeiture Auditor (FSA)	(804) 545-8548
Matos, Carmen	Data Analyst ( <b>FSA</b> )	(804) 545-8545
		(004) 545 0546

venturo, neather	Records Examiner Analysi (FSA) (804) 343-6340		
DEPUTY U.S. MARSHALS	*	AFTER-HOURS (EMERG	GENCY): (703) 898-3267
Hundley, Adam	(804) 545-8526	Stanton, William "Bill"	(804) 441-6323
Palmer, Matthew	(804) 545-8513	Stalnaker, Brian	(804) 545-8522
Patterson, Phillip	(804) 441-6329	Titus, Danielle	(804) 545-8554
Rhodenizer, Aaron	(804) 545-8515	Trevillian, Kevin	(804) 545-8518
Rooks, Brandon	(804) 545-8516		

DETENTION ENFORCEMENT OFFICER

Whitehead, Jeffrey (804) 545-8514

UPDATED: JUNE 13, 2013

# UNITED STATES DISTRICT COURT

## DISTRICT OF MASSACHUSETTS

MICHAELA O. KARLE	
Plaintiff	
<b>v.</b>	Civil Action No.: 3:14-CV-30062-MAP
CAPITAL ONE, ET AL.	
Defendant	
SUMMONS IN A CIV	TL ACTION
To: (Defendant's name and address)  Capital One P.O Box 30281  Sattlake City, UT 8430  A lawsuit has been filed against you.  Within 21 days after service of this summons on you (not days if you are the United States or a United States agency, or described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve complaint or a motion under Rule 12 of the Federal Rules of Conserved on the plaintiff or plaintiffs attorney, whose name and a served on the plaintiff or plaintiffs attorney, whose name and a served on the plaintiff or plaintiffs attorney, whose name and a served on the plaintiff or plaintiffs attorney, whose name and a served on the plaintiff or plaintiffs attorney, whose name and a served on the plaintiff or plaintiffs attorney.	an officer or employee of the United States we on the plaintiff an answer to the attached
If you fail to respond, judgment by default will be entered the complaint. You also must file your answer or motion with	against you for the relief demanded in
and complaint. Tou also must me your answer of motion with	the court.
ROBERT M. FARRELL	STATES DISTRICT COLUMN
LERK OF COURT	SUMMONS
· ·	

SUED ON 2014-04-16 10:07:27.0, Clerk USDC DMA

/s/ - Mary Finn

gnature of Clerk or Deputy Clerk

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>United States Marshals Service Eastern District of Virginia (83) Albert V. Bryan Sr. U.S. Courthouse 401 Courthouse Square Alexandria, VA 22314-5785</li> </ul>	A. Signature    Agent   Addressee
	3. Service Type  D Certified Mail
2. Article Number, 11 11 2000 2000 2000 2000 2000 2000 20	
(Transfer from service lab: 7012 3050 0000 7258 0677	
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-1540